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CONFIRMATION NO. 8089

Bib Data Sheet

SERIAL NUMBER 09/491,094	FILING DATE 01/24/2000 RULE	CLASS 220	GROUP ART UNIT 3727	ATTORNEY DOCKET NO. 1975.99C
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APPLICANTS

Robert C. Heath, Broken Arrow, OK;

Jett E. Stubbs, Broken Arrow, OK;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 05/02/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	OK	3	10	3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Frank J Catalano
 810 S Cincinnati Suite 405
 Tulsa , OK
 74119

TITLE

SMOOTH SPOUTED DISPOSABLE LID FOR A CUP

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
RECEIVED 345		



Bib Data Sheet



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature / Initials				
		STATE OR COUNTRY OK	SHEETS DRAWING 3	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3

ADDRESS

Frank J Catalano
810 S Cincinnati Suite 405
Tulsa ,OK 74119

TITLE

Disposable lid for a cup

FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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